

**NOTICE OF APPEAL FROM THE EXAMINER TO THE
BOARD OF PATENT APPEALS AND INTERFERENCES**

Docket Number (Optional)

JENA-1



In re Application of

DROESCHER, Peter, et al.

Application Number

09/963,680

Filed

September 27, 2001

For 17-METHYLENE STEROIDS, PROCESS FOR THEIR
PRODUCTION AND PHARMACEUTICAL COMPOSITIONS
THAT CONTAIN THESE COMPOUNDS

Group Art Unit

1616

Examiner

QAZI, Sabiha Naim

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TECH CENTER 1600/2900

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the examiner dated, July 17, 2003, rejecting the following claims: 1, 2, 4, 8, 10-18, 20-23.

The fee for this Notice of Appeal is (37 CFR 1.17(b))

\$ 330.00.

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:

\$ _____.

☒ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 13-3402. I have enclosed a duplicate copy of this sheet.

☒ A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

I am the

☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed.

☒ attorney or agent of record.

☐ attorney or agent acting under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a): _____.

Signature

Anthony J. Zelano, Reg. No. 27,969

Typed or printed name

November 17, 2003

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.